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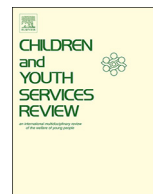
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# ‘When you're sitting in the room with two people one of whom... has bashed the hell out of the other’: Possibilities and challenges in the use of FGCs and restorative approaches following domestic violence

Robin Sen<sup>a,\*</sup>, Kate Morris<sup>a</sup>, Gale Burford<sup>b</sup>, Brid Featherstone<sup>c</sup>, Calum Webb<sup>a</sup>

<sup>a</sup> University of Sheffield, Elmfield, Northumberland Road, S10 2TU, UK

<sup>b</sup> University of Vermont, Burlington, VT 05405, USA

<sup>c</sup> University of Huddersfield, Queensgate, Huddersfield HD1 3DH, UK

## ABSTRACT

Domestic violence continues to be a primary reason for referrals to state child welfare services in advanced industrialised countries. There is growing concern in many state child welfare services to develop responses to it that are both more effective and more humane. The use of restorative approaches, in particular Family Group Conferences (FGCs), has been suggested as one such response. This article draws from data gathered from an evaluation of a UK Government funded “Innovation Project” part of which extended the use of FGCs in an urban local authority area which was already making extensive use of them. This paper presents and explores a typology of FGCs used in situations of domestic violence: *pragmatic*, *resolution-focussed* and *restorative* FGCs, developed from the evaluation data and augmented by relevant literature. The study data revealed *pragmatic* FGCs to be the most used, *restorative* the least. It is suggested that each type of FGC brings potential benefits but only *restorative* FGCs offer the possibility of full restoration in the traditionally understood sense. It is argued that the present mother-centric, risk-adverse, child protection systems which currently operate in many countries provide a powerful resistor to the greater implementation of this restorative way of working.

## 1. Introduction

Domestic violence continues to be one of the primary reasons for referrals to state child welfare services in post-industrial countries. State social work practice in Anglophone countries has moved from a dominant perspective of minimising domestic violence to encourage family preservation in the early post-war period (Gordon, 1989) to a current separation perspective where a mother's separation from a male perpetrator is often seen as the only option, to be enforced by the state regardless of a mother's own preferences and circumstances, and often with limited support to a mother (Goodmark, 2015). There is growing concern in many state child welfare services to develop responses that are both more effective and more humane (Mason, Ferguson, Morris, Munton, & Sen, 2017; Stanley & Humphreys, 2017). The use of restorative approaches, in particular Family Group Conferences (FGCs), has been suggested as one such response.

In the UK, the use of FGCs, a form of Family Group Decision Making (FGDM), has gathered momentum with a number of UK Government funded projects implementing or extending their use (Spring

Consortium, 2017). This article draws from data gathered from an evaluation of a UK Government funded “Innovation Project” (Mason et al., 2017) part of which extended the use of FGCs in an urban local authority area, “City”, which was already making extensive use of them. The use of FGCs formed a central part of a model of “Restorative Practice” implemented in Children's Services in City, and formed part of the local authority's stated goal is to become a “Restorative City”. The scale of the use of FGCs in City allows the data to make a unique contribution in taking forward conceptual and applied understandings of FGDM.

In this paper we discuss the use of FGCs in situations of domestic violence, one of the primary foci of the Innovation funding in City. The paper firstly provides an overview of the complicated relationship between FGCs and Restorative Justice (RJ) before secondly identifying the ways in which the current operation of policy and practice around domestic violence are providing a driver for the development of alternative responses. Thirdly, we introduce and explore a three part typology of FGCs in situations of domestic violence developed from the study data (*pragmatic*, *resolution-focussed* and *restorative* FGCs). We

\* Corresponding author.

E-mail addresses: [r.n.sen@sheffield.ac.uk](mailto:r.n.sen@sheffield.ac.uk) (R. Sen), [kate.morris@sheffield.ac.uk](mailto:kate.morris@sheffield.ac.uk) (K. Morris), [gburford@uvm.edu](mailto:gburford@uvm.edu) (G. Burford), [B.M.Featherstone@hud.ac.uk](mailto:B.M.Featherstone@hud.ac.uk) (B. Featherstone), [cjrwebb1@sheffield.ac.uk](mailto:cjrwebb1@sheffield.ac.uk) (C. Webb).

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conclude by arguing that while the sensitive use of any of the three types of FGC can serve as a bulwark against the undue responsabilisation of mothers for preventing domestic violence, only *restorative* FGCs, where perpetrators overtly take responsibility for the harm they have caused, offer restoration in the traditionally understood RJ sense. We suggest that the present mother-centric, risk-adverse, child protection systems which now operate in many countries (Goodmark, 2015) provide a powerful resistor to the greater implementation of restorative ways of working.

## 2. FGCs, restorative approaches and domestic violence

### 2.1. Conflation, confusion or useful hybridization?

FGCs developed in the late 1980s in New Zealand in discussions with the Maori community around ways of responding to the over-representation of Maori children in the New Zealand care system. The New Zealand Children, Young Persons, and Their Families Act 1989 legislated for their use both in situations of care and protection and youth justice. The statute notably mandated the use of FGCs where there is consideration of placing a child in state care. An FGC consists of a family network coming together to discuss issues of concern relating to children in their network. The meetings are facilitated by an independent FGC co-ordinator and consist of three parts: An introduction to the meeting and information giving session where relevant professionals outline their concerns about the issues related to children in the family; Private family time where the family are left alone to discuss the concerns and devise a Family Plan to address the concerns; and Discussion of the Family Plan between the family members and relevant professionals and, usually, agreement of professional support for the Family Plan where it is safe and legal (Morris & Connolly, 2012).

A number of different approaches fall within the RJ label including FGCs themselves, but also victim-offender mediation, community reparation panels and peace making circles. The most obvious thread that binds them is attempts to establish dialogue between victims, perpetrators and communities affected by a crime in a way that balances the, often conflicting, aims of safety, accountability, empowerment and restoration (Ptacek, 2010). As this description may suggest, the relationship between FGCs in child welfare and RJ is not straightforward: the acknowledgement of an offending harm and the attempt to restore personhood to victim and offender are less obviously applicable to child welfare than criminal justice contexts. This may explain why FGCs were not initially identified as an RJ practice. However, their use in New Zealand with young offenders became rapidly embraced as an example of RJ in action and spread rapidly to other jurisdictions outside of New Zealand under this label. The use of FGCs in matters of child welfare, including in situations of domestic violence, also spread internationally but was notably less associated with the concept of “Restorative Justice”.

The importation of FGCs into different policy, legal and cultural contexts has further resulted in conflation, and arguably confusion, about the relationship between FGCs and RJ. In the UK, the use of FGCs was imported from New Zealand in the early 1990s. While closely following the FGC process developed in New Zealand, their use in the UK is discretionary rather than mandatory, resulting in marked geographical variation in the extent to which FGCs are used between different local regions. Additionally, though the importation of FGCs to the UK reflected some of the social justice and rights based principles which accompanied their introduction in New Zealand, their use has also sometimes been more pragmatically framed as a mechanism for reducing the use of state care for children and, even, as a mechanism by which to ration services to families (Morris & Connolly, 2012).

Ironically, though the use of FGCs in situations of domestic violence is one area of child welfare which lends itself more obviously to the formulation of harm and restoration common to RJ approaches, the desirability of restorative approaches in this area has been heavily

contested for other reasons. RJ practices were initially developed to respond to stranger crime rather than intimate partner violence, and in some jurisdictions their use in situations of domestic violence is specifically outlawed (Ptacek, 2010). It has been argued that RJ approaches do not take sufficient account of the particular nature of intimate partner violence as a repeat offence, often involving overt and subtle forms of coercion and control that are embedded in a relationship, and which are targeted on a specific individual who has had a long-term connection to the perpetrator (Stubbs, 2002). It has been questioned whether restorative approaches can ensure sufficient safeguards for women and children; whether perpetrators can be held properly accountable during, and after, a restorative meeting; and whether the dynamics of wider community relationships necessarily provide a proper foundation for addressing family violence through restorative fora (Stubbs, 2010).

Rogers and Parkinson (2018) make the case for using FGCs following domestic violence, recognising both the reality that many fathers will continue to have contact with their children after separation following domestic violence, and that there are rights based arguments that children should, in most cases, be allowed safe contact with their fathers if they want it and that fathers can still play a positive role in their children's lives after perpetrating domestic violence. In making this case they argue for a distinction between FGCs that are “restorative” in order to ‘mediate between “victim” and “perpetrator”’ (p. 108) and those FGCs that are focused on safety planning for women and children. Their focus is on safety-orientated FGCs which, they argue, can also be reparative and therefore partly restorative, by confronting a perpetrator with the impact his actions have had on a family. We suggest a different emphasis – that the focus of restorative FGCs should be, rather than mediation, the recognition of the harm done by the domestic violence and the attempt to address this harm and restore relationships. We would also highlight that there is empirical evidence that the sensitive use of restorative FGCs in cases of domestic violence can also foreground safety issues, including those related to power and gender power dynamics (Burford & Pennell, 1998; Pennell & Burford, 2000, 2002). Restorative approaches are currently being used to address complex harms, not only in situations of intimate partner violence, but also child to parent violence, sexual violence and child sexual abuse (Ptacek, 2010). They offer the potential for victims' voices and experiences to be heard in a way that formalised court processes do not; for appropriate redress for the harm done to be given to victims; and, for perpetrators to take responsibility for their violence in a way that facilitates their reintegration into the community and reduces the likelihood of recidivism (Braithwaite & Strang, 2002).

### 2.2. Domestic violence and child protection: Practice developments, contemporary questions

The most powerful international driver for change in domestic violence policy and practice is the impact of current policy and practice on women. State acknowledgement of the impact of the harm domestic violence causes can be viewed as a positive result of feminist-led activism, primarily located in non-state agencies, which campaigned for recognition of domestic violence as a public harm. The criminalisation of perpetrators can also provide the redress and protection some survivors of domestic violence seek. However, the state co-option of feminist concerns about domestic violence has also considerably contributed to increased state surveillance and regulation of many marginalised women who have been victimised through domestic violence (Goodmark, 2009). State mandated responses insisting that women separate from violent partners are insensitive to the range of circumstances, contexts, experiences and wishes of women who are subject to domestic violence, including some women for whom there are strong cultural, relational, economic and personal reasons which militate against separation (ibid.). The lack of recognition of these varied circumstances can encourage the “illusion of separation” whereby a

victimised mother, under pressure to separate from an abusive partner, informs a child welfare agency she has separated from her partner, but covertly reconciles or meets with him (Longtin, Morton-Sayles, Nunn, & Sherry, 2011). This can generate a vicious cycle whereby a woman's victimisation is followed by the removal of her children on the grounds that she has failed to protect her children from harm through their continued exposure to the risk of domestic violence.

Such responses also reinforce underlying structural inequalities. The impact of essentialist context-insensitive laws, policies and practices inevitably weigh most heavily on marginalised families – among them poor, non-white, immigrant and refugee and LGBT families – whose lives are more likely to be the target of public surveillance, disapprobation and regulation (Coker & Macquoid, 2015). In the USA it has been noted that separation-focussed state responses to domestic violence in poorer families, coupled with a carceral approach to male perpetrators of domestic violence, contribute to both hyper-surveillance and hyper-incarceration of marginalised communities, feeding inequality, poverty and disrupted communities and family connections. In turn these conditions make domestic violence more likely (Coker & Macquoid, 2015). The experience of a number of women subject to domestic violence is also that the criminal justice system is more focussed on securing a perpetrator's conviction than in meeting their needs for the harm done to them to be acknowledged and addressed (Pennell, Sanders, Rikard, Shepherd, & Starsoneck, 2013).

The two-sided nature of policy and practice developments can also be seen in the UK. The Adoption and Children Act (2002) in England and Wales provided welcome recognition of the harms that children can suffer as a result of witnessing domestic abuse between adults and, indeed, the co-occurrence often of abuse to women and children (Rogers & Parkinson, 2018). However, as in the USA, women can be subject to the double jeopardy of victimisation by an abusive partner and child protection intervention due to their victimisation being seen as a failure to protect their children from domestic violence (Stanley & Humphreys, 2017). While the harm to children of experiencing domestic violence is rightly a concern for services, the pressure for mothers to separate from abusive partners can be combined with the responsibilising of mothers for managing and enforcing that separation, with limited support from the state agencies mandating that separation. Such responses often reflect a failure to fully recognise that domestic violence and coercive behaviours frequently intensify post-separation. At the same time, there are a dearth of services designed to address perpetrators' violent behaviours (Stanley, Miller, Richardson Foster, & Thomson, 2010). Unsurprisingly many mothers receiving such child welfare intervention find it punitive (Featherstone et al., 2014). The importance of developing services that engage men around their abusive behaviour is however starting to be recognised and there is growing interest in exploring different responses to family violence. The current alternatives in the UK are primarily group based, with a recent notable growth in the use of FGCs (Spring Consortium, 2017). However, the overall UK context for services remains one of austerity when demand for child welfare services is rising, with a considerable amount of that demand fueled by domestic violence referrals (Kelly & Westmarland, 2015). Services are often in silos, focused on children, on women, or on men with few approaches that work with all family members simultaneously around domestic violence (Hester, 2011). While there is evidence of some innovation, many services are currently only able to be focus on the provision of safe haven and immediate care for women and children at risk of harm, with funding for ongoing support services and community based provision limited. These services have been particularly vulnerable to spending cuts, with evidence that the poorest localities in the UK have seen the greatest decreases in funding, meaning that accessibility of services between areas is uneven, with the areas of greatest need the least able to provide the needed supports (Webb and Bywaters, 2018).

### 3. Methods

In City, the FGC service had existed since 2008 and before the Innovation funding provided a service to families referred for an FGC by the child and family social work teams due to any care and protection concerns, including domestic violence. Internal requirements in City mean social workers have to refer families for an FGC when there is sufficient concern to merit the calling of an Initial Child Protection Conference (ICPC) – a child protection meeting called in the UK system when there are serious care and protection concerns – though families have the choice as to whether they accept the offer of an FGC or not. The Innovation Project funding was part of a wider investment programme in City. The FGC strand of the funding, on which this study was based, focussed on the upscaling of FGCs through the creation of a new team focussed on delivering FGCs and other restorative ways of working to families receiving earlier help rather than social work intervention; this team also has a specific remit to develop restorative approaches with families where there were domestic violence concerns. It was envisaged that, over time, this would lead to the three longer established FGC teams working with more families where there was ongoing domestic violence. The widespread use of FGCs in the child welfare system in City was a central part of their commitment to a model of “Restorative Practice”, summarised as a default “high challenge, high support” approach to interaction with all families (Webb and Bywaters (2018)). One of City's core aims in adopting this model was to reduce the numbers of children in state care, and there was also a specific focus on reducing the number of repeat referrals to services due to domestic violence (Mason et al., 2017).

The FGC service evaluation was mixed-method and multi-modal, taking place over an eight month period. Ethical approval was granted via City's ethical governance arrangements and by University X. All those taking part did so through a process of informed consent and all data was stored securely and anonymised. In the data presented pseudonyms are used and some case details have been changed to protect family and professional identities. The methods adopted included:

- An analysis of administrative data held by the service for all children and families referred to the service in the 2014 and 2015 years;
- 15 days of practice observation in the FGC teams over three months;
- The development of ten case studies of families who were tracked over the observation period;
- Focus groups with different groups of co-ordinators convened at three points over the course of the study;
- Semi-structured interviews ( $n = 39$ ) and questionnaires ( $n = 66$ ) with FGC co-ordinators and managers;
- And, structured telephone interviews with adult family members in families who had been offered an FGC by the FGC service. Respondents were mainly birth parents but in some cases were kinship carers for children in their family network ( $n = 36$ ). These families included those referred due to concerns about domestic violence, but were not exclusively so.

The typology of FGCs presented below was a key finding from the evaluation, primarily developed from the qualitative strands of the study. These qualitative data consisted of open text questionnaire responses from FGC co-ordinators, semi-structured interviews with professionals and parents, field notes from observations and repeat informal interviews with FGC co-ordinators during the observation period.

Initial data around domestic violence was gathered from August to December 2015 by interviews with the four FGC managers, focus groups with co-ordinators from across the four FGC teams, and questionnaires with both closed and open text answers which all co-ordinators in the service answered. The data was initially organised in Microsoft Word but transferred into Excel to allow for easier word searching across the data sources. The organised data was analysed



thematically (Braun & Clarke, 2006) and provided initial insights into FGC practice in city as well as conceptions of what it might look like in the future. Secondly, from January to April 2016, two researchers were located in two of the FGC teams (“new team” and one of the established teams) and observed co-ordinator practice, sitting in on team meetings, undertaking repeat informal interviews with co-ordinators about their work and observing practice in pre-FGC meetings with families and FGCs themselves. Field notes were taken contemporaneously or close to contemporaneously, analysed thematically and compared between the researchers in the two teams. A small number of follow up telephone interviews were conducted with birth parents, social workers and co-ordinators to seek information on practice with observed families until June 2016.

Issues around practice with domestic violence came up both from questions specifically asked around it in interviews and focus groups, given the Innovation Project funding aims, but were also raised by participants over and above this. In the vast majority of domestic violence cases discussed and observed the violence was primarily male to female physical intimate partner violence, with a serious assault bringing the family to the attention of police and children's services, or escalating concern if they were already involved. Such violence was the primary concern in three out of the ten case study families. In one further case study family a pre-birth assessment was being conducted relating to the severe domestic violence the mother had experienced from a previous partner, which had resulted in her older children living outside her care. The early development of the typology was inductive and arose after analysis of the observation field notes and initial interview, focus group and open-text questionnaire data. From this analysis, *pragmatic* and *resolution-focussed* FGCs were identified. However, interviews with FGC co-ordinators and managers also suggested that FGCs were happening that did not fit these two types, but which we had not observed. The description of *restorative* FGCs was therefore initially developed inductively from interview and focus group data but was further supplemented by engagement with relevant wider empirical literature, particularly the work of Burford and Pennell (1998) and Pennell and Burford (2000, 2002). The typology was presented, alongside other key findings, to a member checking event involving the whole FGC Service in City in October 2016, after which it was refined based on the feedback given by the workforce.

The statistical data presented in this paper comes from two sources. Firstly, FGC co-ordinators completed, at two points in time six months apart near the start and end of the evaluation (T1 and T2), a self-evaluation questionnaire consisting of on 18 item list connected to their practice. They rated their confidence in each item on a scale of 1 (least confident) to 10 (most confident). This was administered twice to track whether there was any change in co-ordinator self-assessed confidence and knowledge in the period of the evaluation. The mean co-ordinator scores for the 32 co-ordinator questionnaires for which we had responses at both time points were sorted into Excel and comparisons for each of the 18 items were made using a paired *t*-test to consider statistical significance. Secondly, basic administrative data was kept on all families referred to the FGC service and was primarily analysed to provide some basic descriptive and outcome data on families who received an FGC. We do not present outcome data here, rather the descriptive data were cross-tabulated and re-analysed using R to provide additional insight into the involvement of fathers in FGCs in City using Chi square tests for statistical significance. This was undertaken in order to help better understand the apparent relative rarity of *resolution-focussed* and *restorative* FGCs. For both sets of statistical data, critical values for significance were set as  $p < .05$ . As the administrative database did not record referral reasons to the FGC service we were unable to separate cases where domestic violence was the referral issue for the analysis. However, the observation work in the FGC teams and previous data on service referrals in City suggested that around a third of referrals to both the FGC service and to child and family social work teams were ones where domestic violence was a primary concern.

## 4. Typology of FGC practice in domestic violence cases

### 4.1. Describing the typology

We explain *pragmatic* and *resolution-focussed* FGCs with brief descriptions from two of the case study families - the most accessible way of illustrating the differences in the FGCs described. As we did not have opportunity to directly observe a *restorative* FGC, this type is presented via one co-ordinator's description of their work, supplemented by engagement with previous literature in this area. We recognise that FGCs are unlikely to fit neatly into only one of the practice types outlined. However, our data suggest that an FGC tends to gravitate towards one of the three types over the course of a family's engagement. This gravitation will be influenced by the extent of paternal, as well as maternal family engagement, and the extent to which the harm caused by the domestic violence, and its underlying causes, are explicitly addressed in the framing purpose of the FGC.

#### 4.1.1. Pragmatic FGCs

The pragmatic nature of this type of FGC is reflected in the utilisation of existing supports for the survivor of domestic violence within their own networks to address professional concerns about children's care and safety, usually following separation from the perpetrator of the violence. This was the most common type of FGC in situations of domestic violence in City. The focus of engagement for the co-ordinator was the care of children, maternal networks of support for this care and the safety needs of the mother. Male perpetrators and paternal networks were neither present at the FGC or engaged in FGC preparation work. As such the meetings were limited in their ability to tackle the issues underlying a perpetrator's violence and they were also the least complex type of FGC in this area of work. Maternal family networks saw little to lose and much to gain in coming together to exercise their “ethic of care” (Morris & Connolly, 2012), while practitioners were usually reassured by the support such FGCs could bring together.

The Jones-Smith family FGC illustrate this type. Mrs Jones had been subject to long-term physical violence by Mr Smith, which had increased in severity during the course of their relationship, culminating in a serious physical assault on Mrs Jones in the family home when their three children were present. Mr Smith had been charged and was awaiting trial. During this time he was subject to bail restrictions preventing him attending the family home where his family continued to reside. A child and family social worker had been allocated to the case following the latest, and most serious assault, on Mrs Jones. She had met with Mr Smith and assessed that he posed a risk to his children as he minimised his violence to Mrs Jones. Following the social worker's assessment, Mrs Jones stated to child welfare services that her relationship with Mr Smith was over. Though it was clear that Mrs Jones had some fear of Mr Smith, there was ambiguity over whether she actually wanted the relationship with Mr Smith to continue once the criminal trial was over. The social worker's initial referral for an FGC suggested that it might involve maternal and paternal networks, but also stipulated that any FGC should not seek to involve Mr Smith due to the risks he posed, so the FGC co-ordinator did not attempt to engage him for the FGC. Mrs Jones' subsequent reluctance to have paternal family involved, meant the family meeting went ahead with only maternal family, two friends of the mother and the children. A further FGC was planned, but the social worker, reassured by the plan the family had in place, notified the family of their intention to terminate social work involvement after the FGC if no new concerns had arisen.

#### 4.1.2. Resolution-focussed FGCs

This type of FGC focused on the resolution of disagreements or practical issues relating to the care of the children involving the mother and father, the maintenance of children's links with wider family networks, and discussion of family arrangements involving maternal and paternal networks. This type of FGC involved some representation of paternal as well as maternal networks. The FGCs observed were post-separation after domestic violence, but with overt intentions for fathers and/or paternal networks to maintain a role in children's lives. These FGCs were forward-looking rather than seeking to provide redress for past harms caused by domestic violence. Children's welfare was foregrounded within the aim of resolving family disputes, and children could be the drivers for this type of FGC taking place through their desire for contact with a non-resident father. Social workers' awareness of the challenges mothers faced in facilitating contact plans could also be raised through their own participation in this type of FGC.

The Brown family illustrate this type of FGC. Mrs Brown and Mr Davis had separated after a history of domestic violence and controlling behaviour culminating in a violent assault and damage to her property for which he had served a custodial sentence. The couple definitively separated after the last assault. Child and family social work had become involved with the family some months before the last assault, primarily due to the domestic violence in the parental relationship and the exposure of their son, Thom (aged 12), to this, but had closed the case when Mr Davis was sentenced. After Mr Davis' release, he sought to re-establish contact with Thom, who wanted contact with his father. Mrs Brown was amenable to this in principle, but concerned that phone contact between Thom and Mr Davis had occurred without her prior knowledge. Social work involvement had recommenced with the family for another reason - Mrs Brown had subsequently become involved in a new relationship which had ended following a violent argument between Mrs Brown and her new partner when they were both intoxicated. This generated the referral from the social worker for an FGC to consider Thom's re-exposure to domestic violence, however the issue of Thom's contact with his father became the predominant issue in discussions between the co-ordinator and Mrs Brown. Initially, Mrs Brown was reluctant for Mr Davis to attend the FGC but came to see it as a forum where arrangements for Thom's contact with his father might be formally resolved. Skilled and empathic practice from the co-ordinator supported Mrs Brown to appreciate that some representation of Mr Davis at the FGC would be needed to resolve the contact issue. The co-ordinator did also offer Mrs Brown a "restorative meeting" with Mr Davis to consider their past relationship and the harm he had caused, but Mrs Brown stated that she did not 'want to look vulnerable in front of him' and declined this possibility. Therefore while Mr Davis was engaged in preparation work for the FGC, and was willing to attend, the preparation work and the FGC were focussed around the contact issue rather than the domestic violence in either of Mrs Brown's relationships, though Mr Davis' past domestic violence and controlling behaviour provided the context to why the issue of contact was difficult. A resolution-focussed FGC took place with Mrs Brown, Thom, Mr Davis, a maternal uncle and aunt and cousin focussing on Mr Davis' future contact with Thom. The family agreed a plan for Thom's contact with Mr Davis and the social worker agreed to meet with Mr Davis to discuss the management of his contact with Thom. The contact plan subsequently fell apart when Mr Davis entered a new relationship and a further FGC was planned. Relationships between Mr Davis and

the maternal networks remained tense, but a communication channel between the maternal uncle and Mr Davis, established at the first FGC, remained open.

#### 4.1.3. Restorative FGCs

This is the most challenging and contested type of FGC in the area of domestic violence and was also the least prevalent in City. *Restorative* FGCs are premised on the desirability of engaging paternal as well as maternal networks, including the perpetrator of the domestic violence, in the preparation of the FGC, and, where safe, the FGC itself. The FGC will focus on acknowledging the harm caused by the perpetrator's violence, providing redress on the part of the perpetrator to those affected by it and putting in place a plan to support both the well-being of the mother and children and the perpetrator's behavioural change. We draw here on Ristock and Pennell's concept of "links and interruptions" praxis as illustrated in the work of Pennell and Burford (2000). The FGC seeks to fire the mechanism of galvanising a network of extended family support, and better targeted professional input, for core family members ("links"). In the preparation work there will be also be extensive engagement and information sharing with the perpetrator and the perpetrator's own networks around the nature of their family violence, its harmful effects and the prevention of future violence ("interruptions"). This type of FGC also draws on the concept of reintegrative shaming (Braithwaite, 1989). The perpetrator's actions are condemned, but with a view to reintegration rather than exclusion. The perpetrator's acknowledgement of the harm they have caused, their acceptance of the need to undertake reparative action to address the harm, and the victim's acceptance of the reparation offered as a suitable redress, underpin the reintegration of the perpetrator. In cases of domestic violence, this reintegration can also be a means of restoring personhood to fathers thereby facilitating them to play an ongoing positive role in their children's lives (Pennell et al., 2013).

An example given through focus group discussion was that of Mr and Mrs James and their two children. Child and family social work were involved with family in part due to domestic violence: verbal abuse, controlling behaviour and suspicions of physical violence from Mr James towards Mrs James, allied with concerns about Mr James' anger-management in front of the children. In addition, there were wider concerns about the quality of parenting of both parents. Mr James remained in the family home. The family were referred to the FGC service primarily because of escalating concerns about the quality of care to the children in order to see if the family could arrive at a plan which would address professional concerns and avoid the initiation of care proceedings. The co-ordinator below describes how a *restorative* FGC occurred via the inclusion of Mr James in the family meeting in order that his past and current aggression could be directly addressed at the meeting:

*Though the mother wasn't afraid of her partner quite a few family members were and they were very anxious he was going to kick off. And I just felt he really, really needed to be there. He was living in the home, the children were living in the home, his issues just sort of needed to be confronted and dealt with so I did quite a lot of work talking to aunties, uncles and cousins and I felt he could sit through and behave himself with enough preparation and I just kept toing and froing and giving people the option that you can leave at any time, and the afraid people did come and he [the father] didn't do anything, and they arrived at a good family plan (Co-ordinator 11, Focus group).*

## 4.2. Exploring the typology

Each type of FGC outlined has potential merits and challenges. Stubbs (2002) argues that women's key aims after domestic violence are protection of themselves and their children and external validation of the abuse, and that these aims differ from the traditional RJ goals of participation, apology and reparation. While such a sweeping assertion may mask the considerable individual differences there are in women's experience of domestic violence (Goodmark, 2009) it also seems a reasonable starting point. Pragmatic FGCs can meet these key aims where mothers choose to separate from a perpetrator and the perpetrator has no on-going role within a family. We suggest their use can refocus child welfare services' gaze on the lived reality of mothers' and children's needs post-separation and provide restoration through the external validation that comes from professionals and the maternal network. However, the exclusion of the perpetrator, and usually paternal networks, from the meeting reduces the poignancy of the validation while excluding the possibility of fully addressing the harm caused by the violence and the behaviours underlying the perpetrator's violence.

Resolution-focussed FGCs can facilitate the restoration of positive communication between maternal and paternal networks about future child care arrangements in a structured setting. These meetings are likely to be tense, but can allow family issues that would otherwise not have been openly discussed to be planned for, with arrangements explicitly agreed. At their most effective Resolution-focussed FGCs can support the restoration of relationships between a mother and father that allow them to discuss and manage practical child care issues and the safe management of non-resident fathers' contact with their child or children – contact which may well have otherwise occurred in an unstructured manner, without parameters. They are also limited in the extent of restoration they can offer due to the lack of explicit focus on the past harm caused by a father's prior violence. There is also a possibility that such forward-looking meetings could minimise past domestic violence – one of the enduring concerns around the past use of family “mediation” following domestic violence (Ptacek, 2010). In the Brown family FGC the social worker's information sharing referred only to relational difficulties between Mrs Brown and Mr Davis and their impact on Thom, though the domestic violence was named by a maternal family member. The social worker's omission appeared to be deliberate due to Mrs Brown's previously stated desire not to look vulnerable in front of her ex-partner. However it set up a potential “elephant in the room” whereby Mr Davis' past violence may not have been explicitly articulated without the family member's intervention.

Restorative FGCs offer the possibility of achieving fuller restoration through focussing on the harm caused by domestic violence and addressing its underlying causes. FGCs cannot be the sole mechanism of such change, and not all violent men will be capable of, or willing to, engage in an FGC process in a manner necessary for it to be restorative – in this respect it is relevant to note that City had also commissioned wider service development focussed on supporting men to address their violent behaviour. However, restorative FGCs could play a substantial role. Many men who have been violent will remain in contact with their children, return to live with their families or begin new relationships (Featherstone et al., 2014; Rogers & Parkinson, 2018). If these men are not engaged directly about their violence, the ongoing management of future violence is outsourced by the state to families, and particularly women, mothers and their networks to manage. This was illustrated in the Jones-Smith family where Mrs Jones' separation from Mr Smith occurred after a social worker assessed Mr Smith to be “high risk” but merely recommended that Mr Smith have no contact with his children, without explicitly prohibiting it. Therefore, while state agencies had deemed Mr Smith too “risky” to visit the family home or be engaged in an FGC, the responsibility for managing any future contact he might have with his children was delegated to Mrs Jones and her network.

**Table 1**

Co-ordinator mean response to Item 9 of self-evaluation questionnaire ( $n = 32$ ).

Item	Time	N	Mean	Std. deviation	t	df	Sig. (2-tailed)
9: Working with families in conflict (including violence)	1	32	6.84	1.273	-1.852	31	0.074
	2	32	7.25	1.107			

## 4.3. Exploring reasons behind the rareness of restorative FGCs

We interrogated the data to better understand the reasons which might militate against the greater use of *restorative*, and to a lesser extent *resolution-focussed*, FGCs in city and found three potential interlocking influences: co-ordinator practice confidence around domestic violence; maternal-network centric FGC practice; and, separation-focussed social work practice.

### 4.3.1. Co-ordinator practice confidence working with family violence

FGC co-ordinator practice was generally highly-skilled, empathic and committed to supporting family strengths (Mason et al., 2017). Underlying this, co-ordinators appeared very confident in their practice. The self-evaluation questionnaire data showed co-ordinators started off with high levels of confidence in their job role at the start of the evaluation (T1, mean overall confidence rating, 7.6) and remained so close to the end of it (T2, mean overall confidence rating, 7.81). However, co-ordinators were less confident working with families where violence was an issue (see Table 1).

The T1 mean score for Q.9 ‘Working with families in conflict (including violence)’ (6.84, SD, 1.273) was the second lowest of the 18 items; and though the T2 mean score had increased (7.44, SD 1.107), the increase was not statistically significant and the item was still the joint second lowest scored item at T2. This item was also only one of two items where any co-ordinator ranked their confidence as low as a “2” at either time point. Interview and focus group data suggested this area of practice was a considerable cause of anxiety for some co-ordinators. The co-ordinator workforce was keenly aware of the reservations that have been raised about the use of restorative methods in situations of domestic violence and over a quarter of them stated they wanted further training in working with domestic violence. The primary areas for development they identified were: gauging when it might be too dangerous to involve a perpetrator in an FGC; and managing the complex dynamics in a family meeting where a perpetrator and victim were brought together, as illustrated by the following comment:

*There's all kinds of complicated things you're aware of when you're sitting in the room with two people one of whom you know has bashed the hell out of the other and you need to convey you know that...there are just all kinds of little things that are really quite difficult.*

(Co-ordinator 29, Focus Group Discussion)

Towards the end of the evaluation some co-ordinators with, by then, greater experience of using *restorative* FGCs had grown more confident in their use, but those with less experience of them remained worried by the prospect:

*I have really enjoyed the challenge of working with domestic abuse cases and heavily involving perpetrators'*

(Open text questionnaire response, T2, on positives of current job role co-ordinator 5)

*'My own anxieties about involving Dads where there has been domestic abuse in parental relationship.'*

(Open text questionnaire response on negatives of current job role, T2, co-ordinator 33)



**Table 2**

Crosstab comparing number and percentage of families at FGC that had at least one adult from the extended maternal family attending the FGC by living arrangement.  $N = 167$ .

Living arrangement	Maternal family presence			
	None from maternal side		At least one from maternal side	
With dad (%)	1	(4.00)	24	(96.00)
With mum (%)	2	(2.15)	91	(97.85)
With both parents (%)	2	(4.08)	47	(95.92)
Total (%)	5	(2.99)	162	(97.01)

$\chi^2 = 0.514$ ,  $df = 2$ ,  $p > .05$ .

#### 4.3.2. Maternal-network centric FGC practice

The second potential factor was the relative lack of paternal network involvement in FGCs. In 2015, the FGC service had started to record the attendance of maternal networks (any maternal family member), the attendance of external paternal networks (any paternal family other than the father), the attendance of the father, and the engagement of the father in FGC preparation work. We analysed the available data for those families for whom these indicators were recorded in 2015, looking only at those families where children were living with either or both of their birth parents. The Chi square tests for statistical significance revealed that there was no statistically significant association between maternal family attendance at FGCs and children's living arrangements: a very high proportion of families had at least one adult from the mother's side attend the FGC, regardless (Table 2,  $\chi^2 = 0.514$ ,  $df = 2$ ,  $p > .05$ ). By contrast there was a statistically significant association between the attendance of extended paternal family and the living arrangements for the children (Table 3,  $\chi^2 = 28.275$ ,  $df = 2$ ,  $p < .001$ ). Where children were living with their father, or with both parents, there was a significantly higher proportion of FGCs where at least one adult from the extended paternal side of the family was present (60% and 85.7% respectively). When children were living with their mother by contrast the paternal family were present in only 39.4% of FGCs.

Fathers' own attendance (Table 4,  $\chi^2 = 29.8$ ,  $df = 2$ ,  $p < .001$ ) and engagement in FGC preparatory work (Table 5,  $\chi^2 = 20.787$ ,  $df = 2$ ,  $p < .001$ ) were also statistically associated with a child's living arrangements: children living with their father or with both parents, had a higher proportion of fathers attending FGCs than children who were living only with their mother (85.7% compared to 42.5%). Similarly, children living with either their father or both parents had a significantly higher proportion of fathers being involved in preparatory work for an FGC (90% and 91.8% respectively, compared to those children living with their mother (58.2%).

While we were unable to identify the proportion of these families for whom domestic violence was a primary concern, it is the case that the maternal-network centric nature of FGC attendance would militate against the use of both *resolution-focussed* and *restorative* FGCs when

**Table 3**

Crosstab comparing number and percentage of families at FGC that had at least one adult from the extended paternal family attend the FGC by living arrangement.  $N = 168$ .

Living arrangement	Paternal family presence			
	None from paternal side		At least one from paternal side	
With dad (%)	10	(40.00)	15	(60.00)
With mum (%)	57	(60.64)	37	(39.36)
With both parents (%)	7	(12.29)	42	(85.71)
Total (%)	74	(44.05)	94	(55.95)

$\chi^2 = 28.275$ ,  $df = 2$ ,  $p < .001$ .

**Table 4**

Crosstab comparing number and percentage of families at FGC where father attended the FGC by living arrangement.  $N = 150$ .

Living arrangement	Whether father attended FGC			
	Father did not attend		Father attended	
With dad (%)	3	(14.29)	18	(85.71)
With mum (%)	46	(57.50)	34	(42.50)
With both parents (%)	7	(14.29)	42	(85.71)
Total (%)	56	(37.33)	94	(62.67)

$\chi^2 = 29.8$ ,  $df = 2$ ,  $p < .001$ .

**Table 5**

Crosstab comparing number and percentage of families at FGC where the father was involved in the FGC by living arrangement.  $N = 148$ .

Living arrangement	Whether father was involved in FGC			
	Father not involved		Father involved	
With dad (%)	2	(10.00)	18	(90.00)
With mum (%)	33	(41.77)	46	(58.23)
With both parents (%)	4	(8.16)	45	(91.84)
Total (%)	39	(26.35)	109	(73.65)

$\chi^2 = 20.787$ ,  $df = 2$ ,  $p < .001$ .

Note: Chi square tests may not be an accurate indicator of statistical significance when observed counts in cells are smaller than 5.

domestic violence was a concern. The statistical results also do not indicate why fathers and paternal networks were less involved and whether this was due to mother-centric practice or fathers' refusal to engage. However, the qualitative data provided some illustration of how these factors could combine. Mothers tended to be the first point of contact for FGC co-ordinators as they were overwhelmingly the primary carers for children. In interviews and focus group discussions co-ordinators discussed how they worked hard to involve men and we observed co-ordinators attempting to engage, fathers, step-fathers and male partners living in the family home. However, we also saw that some men did not respond to requests to meet with co-ordinators. In such instances, co-ordinators then had to make pragmatic decisions about proceeding to an FGC with maternal networks alone, or trying to further engage fathers. Particularly when fathers were not living in the family home, it appeared the former was more likely as one co-ordinator illustrated:

*I've had an FGC review recently that started as a pre-birth. Dad has attended all the other meetings but recent psychiatric assessment has said he can't parent and this time he's been reluctant to engage with me so we made a decision that we wouldn't push that as the focus had to be on mum and baby, so I guess we've made a decision not to pursue the fact that he wasn't engaging with me – we've both made a decision there haven't we?*

(Co-ordinator 22, Focus Group)

We also saw how decisions to proceed to an FGC with only maternal networks could be more likely in cases involving domestic violence because mothers were offered an effective veto on who else should be invited. In the Jones-Smith family case, the co-ordinator sensitively reflected on a decision to proceed with an FGC with the maternal network alone, because pushing for the involvement of the extended paternal family involvement might jeopardise the prospect of any FGC happening:

*Mrs Jones has agreed to her family being involved but father's family not currently included. The absence of his family does limit the meeting in the co-ordinator's view but the co-ordinator sees this as an initial meeting and they can work towards wider participation over time – she doesn't want to rush at this and lose the progress made.*



(Fieldwork note following practice observation with Jones-Smith family)

#### 4.3.3. The influence of a separation perspective

The final factor was a separation perspective evident in some children and families practice in City. Co-ordinators had considerable experience of social workers seeking to exclude men from an FGC whom they felt were a risk without giving them opportunity to try and engage the men around their violence:

*Have you ever excluded a man from an FGC due to domestic violence?*  
(Researcher, Focus Group Discussion)

*I guess it's like any risk situation we give it to the family and ask who they're uncomfortable with and look at alternatives not just because it was domestic violence but for other issues... it's more likely when a social worker don't want a person to have contact with the children and if [an] FGC goes ahead they don't want him to be there, and that's something that would be imposed on the family.*

(Co-ordinator 2)

This scenario was illustrated in the Jones-Smith case where the social worker had deemed the father to be too “high risk” to be engaged in a discussion about an FGC, due to his domestic violence and attitudes towards his violence. However, as noted, such an assessment was inconsistent with the social worker's delegation of the responsibility for managing any future potential contact between Mr Smith and the children to Mrs Jones and her family.

The existence of a separation perspective was also suggested by the reported reception of the new FGC team in City:

*Discussion with co-ordinators in New Team, the introduction of the domestic violence FGC service seems to have led to some negativity among other professionals in City. Comments include those suggesting “Mum” should be leaving “Dad” rather than having an FGC*

(Fieldwork notes following practice observation day one, New Team)

Allied with the two factors discussed above, a separation perspective set a context for an FGC which meant violent fathers were unlikely to be engaged, making *restorative* FGCs unfeasible, as well as *resolution-focussed* FGCs less likely.

## 5. Limitations

Not all of the data, most notably the administrative dataset around maternal and paternal network involvement, exclusively involved families who had experienced domestic violence and we do not therefore know to what extent maternal-centric representation at FGCs was influenced by the fact that domestic violence was present. In terms of child welfare practice in City more broadly, these data do strongly suggest maternal network centred representation at FGCs. Whether this was down to paternal refusal to engage, practitioner choices or maternal preferences for not involving fathers is not possible to determine clearly, but qualitative insights did suggest all three factors could combine. Secondly, while the administrative dataset did have some basic outcome data, we have not presented these here as it is not possible to disaggregate them for families where domestic violence was an issue and the focus of this paper is on exploring the processes whereby FGCs are offered to families in situations of domestic violence. Finally, it should be noted that the typology is presented tentatively as a way of conceptualising FGC practice with families following domestic violence, but is by no means suggested as a definitive model.

## 6. Conclusion

There is growing evidence from a number of countries of the way in which separation-influenced policy and practice following domestic

violence, underpinned by a failure to recognise the diversity of women's experience and wishes, are undermining some victimised women's welfare (Goodmark, 2015). This article has illustrated that practice responses, even in a restorative-minded state agency, may rub up against the constraints of mother-centric practice, men's own resistance to engaging with child welfare services and a separation perspective which currently dominates the response to domestic violence in both the UK and internationally.

A pre-condition for a domestic violence perpetrator's involvement in a restorative process is their willingness to take responsibility for the harm they have caused through their violence. Some men's unwillingness to do so will prevent *restorative* FGCs taking place. However, in City, the possibility of *restorative* FGCs is currently constrained by a stage before this. Fathers can be more reluctant to engage with FGC co-ordinators and fathers and paternal networks are also less persistently engaged by FGC co-ordinators; at the same time the involvement of fathers who have perpetrated violence is restricted by routine social work practices – in particular context insensitive responses which determine that families must separate and that violent men are too risky to be engaged. Such responses tend to outsource the management of violent men's future behaviour to families, largely unsupported. If more *restorative* FGCs are to happen, then greater realism is needed about the likely on-going involvement of many perpetrators in children's lives after domestic-violence, and greater effort to engage paternal networks and perpetrators of domestic violence in restorative discussion at an early stage of FGC preparation. This may not ultimately result in all perpetrators attending an FGC – dependent on legal mandates, the perpetrator's attitudes and views, the mother and children's wishes and safety considerations. However, such early engagement opens up the possibility of firing the “links” and “interruptions” mechanisms that can disrupt family violence, through shining a light on its occurrence within the nexus of supportive family networks (Pennell & Burford, 2000, 2002).

Feminist criticisms of restorative approaches in situations of domestic violence have focussed on three main questions: the safety of women and children, holding offenders sufficiently accountable and giving sufficient focus to victim experience and needs (Ptacek, 2010). These criticisms are usually made by those with many years of experience in engaging with domestic violence, and deserve careful consideration. However, it is also important to recognise that there is evidence that FGCs can be used restoratively in situations of domestic violence to reduce violence while foregrounding safety concerns for women and children. This evidence highlights that while models of practice are conceptually important, the content of practice within the model is also crucially important. Extensive engagement and preparation with families, supports for families, the provision of preventative domestic violence services and, ultimately, beginning to unpick the structural and power inequalities underlying domestic violence, are all necessary ingredients to making restorative approaches work well.

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There is no declaration of interest for any of the authors which requires to be made.

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